

Application *for exemption from permit*

This application is based on WAC 246-215 (Rules and Regulations of the State Board of Health for Food Service)

Office use only:

☐ Approved

☐ Denied

Expires _____

Food items that may be exempted from permit:

- **Popcorn** (including kettle corn)
- **Cotton candy**
- **Dried herbs and spices** (if processed in an approved facility)
- **Machine-crushed ice drinks** (premix is frozen and dispensed completely within a self enclosed machine like, icees, slushies or slurpies)
- **Corn on the cob** (prepared for immediate service with butter, shake on spices or commercial mayonnaise in squeeze bottle only)
- **Whole roasted peppers** (if roasted for immediate service)
- **Roasted nuts, roasted peanuts** (including candy-coated)
- **Caramel apples** (commercially made)
- **Fruits and vegetables for sampling** (if used for individual samples of nonpotentially hazardous produce)

Applicant Name

Daytime Contact Phone

Business Name

Email

Mailing Address

City, State, Zip

Food Items, check all that apply:

- | | |
|---|---|
| <input type="checkbox"/> Popcorn | <input type="checkbox"/> Roasted nuts |
| <input type="checkbox"/> Cotton candy | <input type="checkbox"/> Commercially made caramel apples |
| <input type="checkbox"/> Herbs and spices | <input type="checkbox"/> Fruit and vegetable samples |
| <input type="checkbox"/> Machine crushed ice drinks | <input type="checkbox"/> Whole peppers |
| <input type="checkbox"/> Corn on the cob | |

Food Safety Requirements:

All food safety rules must be followed or the exemption will no longer be valid. Read the statements below and mark Yes (Y), No (N), or Not Applicable (N/A).

Y N N/A

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. At least one person will have a Washington State Food Worker Card. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Food workers will not work if they are sick. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. A handwash station will be provided in the work space. Either a plumbed sink or an insulated container with a spigot that can lock in an open position – capacity 5 gallons or more filled with warm water and a bucket to collect waste water. Pump handsoap and paper towels must be provided. Hands will be washed as needed. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Water, ice and food will be from approved sources. Homemade food or home storage of food, utensils or equipment is not allowed. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. No bare hand contact with ready-to-eat foods. Use barriers like utensils, bakery papers or gloves (which must be changed when contaminated, ripped, or after changing tasks). |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Employees will have accessible restrooms with hot water for handwash. All employees must wash their hands after using the restroom and again when they return to the work space. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Food, ice and single-service products will be stored off the ground and away from sources of contamination. Use food-grade containers for food storage and transport. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Provide an adequate number of clean utensils or a plumbed three compartment sink for dishwashing. All utensils will be washed in hot, soapy water, rinsed in clean water, sanitized, and <i>air dried</i> before use. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Dishwashing, storage and any limited preparation will occur at an approved facility/commissary. Name _____ |

A copy of this approved exemption application must be at the site of operation.

Signature of Applicant

Date

Signature of Regulatory Authority

Date

EASTGATE
14350 S. E Eastgate way
Bellevue, WA 98007
206-296-9791

DOWNTOWN SEATTLE
401 5th Avenue, Suite 1100
Seattle, WA 98104
206-263-9566